## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10289912

01 41140 40 500 500									1000	111		
CLAIMS AS FILED - PART I								SMALL	ENTITY		OTHE	R THAN
TOTAL CLAIMS			(Column 1)		(Col	Column 2)		TYPE		OR		ENTITY
								RATE	FEE	].	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20= *					X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			4 minus 3 = *					X43=		OR	X86=	86
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT						+			
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR	+290=	
CLAIMS AS AMENDED - PART II								TOTAL	L	OR.	TOTAL	X10
		(Column 1)	(Column 2) (Column 3					SMALL	ENTITY	OR	OTHER SMALL	
	1		HIGHE		(Coldinii 3)	ήr		~— <u> </u>	<b>7</b>		,	
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIOL PAID FO	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	İ	X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MI	JLTIPLE DE	PENDENT (	CLAIM							
				·			L	+145=		OR	+290=	
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column		(Column 3)					•	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .		=	ſ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= .	<b> </b> -	X43=		l t	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7,402		OR		
							L	+145=		OR	+290=	
						•	. — 1A	TOTAL ODIT. FEE		OR ,	TOTAL ODIT. FEE	
		(Column 1)		(Column	(2)	(Column 3)						
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	T R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			X\$18=	
	Independent		Minus	***		=	-	X43=		OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	A40=		OR	X86=	
					•			+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***OR ADDIT. FEE												
T	he *Highest Num	ber Previously Paid	For (Total or	o SPACE is le Independent)	is the l	3, enter "3." nighest number			ropriate box			